



CULPEPER COUNTY, VIRGINIA

BASEMENT PACKAGE APPLICATION

Building Department • 302 N. Main St., Culpeper VA 22701 • 540-727-3405 www.culpepercounty.gov

Plans are not required for the Basement Package Permit. However, you must read thoroughly the package requirements/details & follow the plan as it is written. Any variation will require drawings to be submitted. The Basement Package is designed for same-day permit issuance. No waiting, no review, no plans.

Before submission you must acquire a Zoning Permit from the jurisdiction in which you are building.

SITE ADDRESS LOCATED IN ☐ TOWN (540) 829-8260 ☐ COUNTY (540) 727-3404

JOB (SITE) LOCATION _____

PERMIT # _____ - _____

STREET ADDRESS _____

TAX MAP # _____

CITY/TOWN _____ ZIP CODE _____

OWNER INFORMATION

NAME _____ PHONE NUMBER _____ CELL PHONE NO. _____

ADDRESS _____
City/Town State Zip Code

As the owner of the property listed above, I have assigned the following Contractor/Agent to pull this Building Permit on my behalf.

CONTRACTOR/AGENT NAME _____ DATE _____ Owner Signature _____

CONTRACTOR INFORMATION ☐ OWNER OF PROPERTY If owner is contractor Date of birth ____/____/____

CONTRACT AMT OR EST AMT BUDGET \$ _____ ESTIMATED TIME OF CONSTRUCTION: _____

BUSINESS NAME _____ PHONE NUMBER _____

ADDRESS _____
City/Town State Zip Code

VA STATE CONTRACTOR'S LICENSE # _____ CLASS _____ EXPIRATION _____

Online verification _____ P/T initial

Class 'C' must submit copy of Contract w/ all signatures & Amount

DESCRIPTION OF WORK ☐ RESIDENTIAL ☒ 2009 IRC

Bedrooms* _____ Bathroom _____ Kitchen _____ TV Room _____ Office _____ Playroom _____ Other _____

Size of Constructed area _____' x _____' = _____SF Is this area intended to become a separate residence? _____

Describe scope of work _____

*County residents (if adding a bedroom) you must contact Health Dept. regarding well/septic restrictions 540-829-7466. If approved they will supply you with an approval which you must submit with this application.

CONTACT INFORMATION FOR PERSON RESPONSIBLE FOR PROJECT

NAME _____ DAY PHONE # _____

E-MAIL _____ CELL PHONE # _____

It is the responsibility of the person issued this permit to insure adherence to all zoning and building regulations. It is the responsibility of the person to schedule all necessary inspections and understand a final inspection will be necessary to close this permit. Refunds will be paid only if work has not been performed and must be submitted in writing within six (6) months of expiration, revocation, or discontinuance.

Owner or Authorized Agent _____ Print Name: _____ Date: _____

Application reviewed and accepted by _____ Permit Tech

AFFIDAVIT

☐ HOME OWNER--Acting as Contractor ☐ CONTRACTOR Business Name: _____

Print Individual's Name: _____

I affirm that I have applied for a building permit to erect a structure or repair or improve an existing structure on said land known as (site address) _____ Tax Map No. _____.

I affirm that I am aware of the provisions of Title 54.1, Chapter 11, Code of Virginia that requires a contractor to be properly licensed before he may bid or undertake contracting work of \$1,000 or more. I further certify that I am familiar with the responsibilities of an awarding authority specified in Section 54.1111 of the Code which prohibits any awarding authority from issuing permits or allowing the issuance of such permits to any contractor not properly licensed under the provisions of the Code, and that to do so would constitute the commission of a misdemeanor.

I affirm that I understand that a contractor must be licensed as follows (please indicate your class); ☐ **Class C** contractor for any job of \$1,000 or more, but less than \$10,000; ☐ **Class B** contractor for any job of \$10,000 or more but less than \$120,000; and **Class A** contractor for any job of \$120,000 or more.

I affirm that I am duly licensed under the terms of Title 54.1, Chapter 11, Code of Virginia to carry out or superintend this work; OR I am not subject to licensure as a contractor, subcontractor, or owner-developer pursuant to such title. I affirm that I have paid in full any license fees required by any county, city, or town so as to qualify me to bid upon or contract for the work for which this permit has been applied.

This permit becomes null and void if work or construction authorized is not commenced within 6 months after permit issuance, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced. A renewal fee of \$25.00, plus 2.0% State surcharge (\$25.50) shall be applied for 6-month period of inactivity, not to exceed the initial cost of the permit.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not, the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Authorized Signature

Print Name

Date

FEE SCHEDULE TO BE COMPLETED BY ADMINISTRATIVE STAFF

Permit Fee Schedule		Fee Schedule	Actual Sq. Ft. Provided by Plan Review	Actual Permit Fee	Comments
Size of the area under construction ____ x ____		\$.15 / sq.ft.			
Sq Ft of area unfinished					
Residential Minimum each		\$50.00 each			
SUBTOTAL PERMIT				\$	
State Levy		2%			
TOTAL				\$	
County Zoning Fee		\$50.00			
County Site Plan		\$40.00			
TOTAL PERMIT FEE				\$	